PART B—ISSUE FEE TRANSMITTAL **Box ISSUE FEE** "his form, together with a :able fees, to:

**Assistant Commissioner for Pacents** Washington, D.C. 20231



MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 considered where appropriate. All further correspondence including the Issue Fee Receipt, the ratent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

QM12/0113

RODGERS & RODGERS 880 NORTH ISLAND DRIVE ATLANTA, GA 30327

Note: The certificate of mailing below Note: The certificate of mailing back can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

## **Certificate of Mailing**

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Walter A. Rodgers

(Depositor's name)

(Signature)

APPLICATION NO. FILING DATE			TOTAL CLAIMS	EXAMINER AND GROUP ART	TUNIT DATE MAILED	
; ;	08/926,788	09/10/97	006 S	RIVASTAVA, V	3761	01/13/00
First Named Applicant			154(b) term ext. =	0 Day	<b>5</b> .	

TITLE OF

INVENTION COMBINATION BACKFRAME AND SELF CONTAINED BREATHING APPARATUS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3 1339.08.A	128-205	.220 G	86 UTIL	ITY YES	\$605.00	04/13/00
1. Change of correspondence address of Jse of PTO form(s) and Customer N  Change of correspondence address of STO/SB/122) attached.  "Fee Address" indication (or "Fee	umber are recommended, but ss (or Change of Corresponde	(1) the names of attorneys or age the name of a member a regis and the names of	the patent front page, list up to 3 registered paternts OR, alternatively, (2 single firm (having astered attorney or agent fup to 2 registered paternts. If no name is listed, noted.	Walte	B. Middleton r A. Rodgers	
3. ASSIGNEE NAME AND RESIDENC PLEASE NOTE: Unless an assignee Inclusion of assignee data is only ap the PTO or is being submitted under filing an assignment.  (A) NAME OF ASSIGNEE INTERNATIONAL SAF  (B) RESIDENCE: (CITY & STATE OF Lawrenceville, Riease check the appropriate assignation individual XI corporation or	e is identified below, no assign proplate when an assignment r separate cover. Completion ety Instrumen R COUNTRY)	ar on the patent. usly submitted to T a substitue for	to Issue Fee			
The COMMISSIONER OF PATENTS A	ND TRADEMARKS IS reques	sted to apply the Is	ssue Fee to the applic	ation identified above.		88
NOTE; The Issue Fee will not be accept or agent; or the assignee or other party Trademark Office.  Burden Hour Statement: This form	In interest as shown by the re	e applicant; a regi cords of the Pater	-15-00 Istered attorney			80000000 800:209 800:00
depending on the needs of the indivi- to complete this form should be sen Office, Washington, D.C. 20231. DC ADDRESS. SEND FEES AND THIS Patents, Washington D.C. 20231	dual case. Any comments of the Chief Information Co. NOT SEND FEES OR CO	on the amount of Officer, Patent ar OMPLETED FOR	time required nd Trademark RMS TO THIS	19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·	2000 2000

of information unless it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection

s form, together with Battle leafles to: Copox ISSUE FEE Assistant Commissioner for Pate Washington, D.C. 20231 MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 Note: The certificate of mailing below continue be used for domestic mailings of the Issue Fee (Respire). This certificate cannot be used for any other accompanying papers. Each additional paper, such as an through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) assignment or formal drawing, must have its own certificate of mailing. specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for **Certificate of Mailing** maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mall in an envelope addressed to the Box Issue Fee address above on QM12/0113 the date Indicated below. RODGERS & RODGERS 880 NORTH ISLAND DRIVE Walter A. Rodgers (Depositor's name) ATLANTA, GA 30327 (Signature) 2000 February 15 (Date) **TOTAL CLAIMS EXAMINER AND GROUP ART UNIT** APPLICATION NO. FILING DATE DATE MAILED: 3761 01/13/00 08/926,788 09/10/97 CONTRACTOR SRIVASTAVA, V First Named Applicant LEWIS, 35 USC 154(b) term ext. 0 Days. TITLE OF INVENTION COMBINATION BACKFRAME AND SELF CONTAINED BREATHING APPARATUS ATTY'S DOCKET NO. **CLASS-SUBCLASS** BATCH NO. SMALL ENTITY FEE DUE DATE DUE APPLN. TYPE 1339.08.A 128-205.220 UTILITY \$605.00 04/13/00 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list James B. Middleton Use of PTO form(s) and Customer Number are recommended, but not required. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) Walter A. Rodgers Change of correspondence address (or Change of Correspondence Address form the name of a single firm (having as a member a registered attorney or agent) PTO/SB/122) attached. and the names of up to 2 registered patent ☐ "Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47) attached. attorneys or agents. If no name is listed, no name will be printed. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 4a. The following fees are enclosed (make check payable to Commissioner PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. of Patents and Trademarks): Inclusion of assignee data is only appropriate when an assignment has been previously submitted to X Issue Fee the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for Advance Order - # of Copies 10 filing an assignment. (A) NAME OF ASSIGNEE
International Safety Instruments, Inc. 4b. The following fees or deficiency in these fees should be charged to: (B) RESIDENCE: (CITY & STATE OR COUNTRY) DEPOSIT ACCOUNT NUMBER\_ Lawrenceville, GA Please check the appropriate assignee category indicated below (will not be printed on the patent) (ENCLOSE AN EXTRA COPY OF THIS FORM) X Issue Fee X corporation or other private group entity government Advance Order - # of Copies\_ The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application Identified above. (Authorized Signature) (Date) NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the Patent and Trademark Office Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

TRUMSMIN THAT TO HATH FEE

of information unless it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection